

EFFORTLESS SLEEP-HOW TO GET DEEP REST EFFORTLESSLY

20 April 2021

About the workshop:

- The theoretical basis for the workshop is mindfulness-based cognitive therapy together with acceptance and commitment therapy.
- We focus on the importance of good sleep hygiene and tips such as keeping to a routine, keeping the bedroom clutter-free and screenfree.
- We provide techniques for relaxation and how to 'let go' fully.
- We raise awareness of the art of winding down in a 24/7 culture (decreasing hyper-arousal).
- The workshop demonstrates that individual's difficulty with sleep is taken seriously and that support is available for them.
- Delegates are provided with printed resources and also the option to talk to the workshop presenter if they have any questions that they would like to ask.
- Further one-to-one sessions can be provided for those requiring more help.

Who is most likely to experience sleep problems?

- People who are experiencing psychosocial problems (e.g. work stress, relationship stress)
- People who frequently experience changes in their daily rhythms (e.g. business travellers dealing with jet lag and changing sleeping environments
- People using stimulants like caffeine, or nicotine
- People who have medical conditions that can cause pain or are taking medications with side effects may cause insomnia (e.g. cold and asthma medications)
- Pregnant women
- People who sleep with a disruptive bed partner (e.g. those who snore or have periodic leg movements) (Klink et al, 1992).

We are offering sleep services for employees in the workplace as part of the 'Elephant in the Room' approach to wellbeing. Past feedback from our sleep improvement workshop has highlighted that employees have found the workshop beneficial, reassuring and informative and enjoyed having the opportunity to talk to someone with an in depth knowledge of sleep after the workshop.

The Speaker: Amy McClelland MSc, BSc, BAHyp. is a Coaching Psychologist who specialises in Individual and Organisational Wellbeing. She completed her BSc in Psychology at the School Of Psychology, Cardiff University, and went on to complete an MSc. in Psychology within the same university; subsequently Amy was elected Chair of the Post Graduate Occupational Psychology Committee with the BPS whilst working at the Welsh Psychotherapy Partnership Cardiff. She completed her training in Hypnotherapy with the British Academy of Hypnosis in 2007.

Amy's main areas of interest include Coaching for Sleep and Pain Management. In her evidence-based interventions, she uses CBT, Hypnosis, Positive Psychology, ACT (Acceptance and Commitment Therapy) and MBCT (Mindfulness-based cognitive therapy). It gives her great pleasure to help people with sleep problems (such as insomnia, sleep anxiety and sleepwalking), watching them move on and learn how to sleep soundly again.

In addition to working with large organizations (her clients have included Westinghouse, JTI International, Renault, Ford and Revlon) Amy has worked extensively on a one-to-one basis. Being supportive, caring and structured are central facets of Amy's personal coaching style and she will be bringing these qualities to the Cardiff Sleep Clinic. Amy had an unusual and exciting childhood, spending her early years living and being educated on a sailing boat with her family. This period of voyaging, throughout the Mediterranean, was followed by an education in France. Expect to hear Amy making references to how we can learn from other cultures when it comes to health and wellbeing.

About Sleep UK Sleeplessness statistics.

- Women are three times more likely than men to suffer-75% of women report sleep problems, compared with 25% of men (Espie 2012).
- 64% of people who report disturbed sleep said that they were less productive at work (Espie, 2012).
- According to the Guardian, a freedom of information request revealed health trusts spent £49.2 million on the drugs in 2010-11, up from £42m three years previously-an increase of more than 17%

Sleep and Performance

"Insomnia is significantly associated with poorer physical and mental quality of life, work productivity and activity impairment" (Baran et al, 2009).

In a self-report study with a sample of 19, 711 adults, findings suggested that those diagnosed with insomnia had significantly lower physical and mental scores and greater activity impairment scores than subjects in the non-insomnia group. Employed subjects in the non-insomnia group had greater absenteeism, presenteeism and work-productivity loss than those in the non-insomnia groups (Baran et al,2009).

Sleep and Health and Safety.

In a US national cross-sectional survey of commercially insured health plan members selected from more than 34 million HealthCore Integrated Research Database, it was concluded that the average costs of insomnia-related accidents and errors (\$32 062) were significantly higher than those of other accidents and errors (\$21 914). Simulations estimated that insomnia was associated with 7.2% of all costly workplace accidents and errors and 23.7% of all the costs of these incidents (Coulouvrat et al, 2012).

References

Baran, R., Bolge, S., Doan, J., Kannan, H. The Association of Insomnia with quality of life, work productivity and activity impairment (2009) Quality of Life Research. 18: 415-422. Bootzin, S., Epstein, D. (2011). Understanding and Treating Insomnia. Annual Review of Psychology, 7: 435-58.

Coulouvrat, C., Berglund, A., Fitzgerald, T., Harjak, G., Kessler, R., Roth, T., Shahly, V., Shillington, C., Stephensn, J., Walsh, J,K. (2012). The Associations of insomnia with costly workplace accidents and errors: results from the American insomnia survey. Archive of General Psychiatry. 10 (1054-63).

Espie (2012)http://www.greatbritishsleepsurvey.com/2012report/Klink, M., Kalterbour, W., Lebowitz, M., Quan,S.(1992). Risk Factors Associated With Complaints of Insomnia in a General Adult Population: Influence of Previous Complaints of Insomnia. Arch Intern Med, 152(8):1634-1637.

Jensen, J.(2002). Dirt Farmer Wisdom. Redwheel/ Weiser.

Klink, M., Kalterbour, W., Lebowitz, M., Quan,S.(1992). Risk Factors Associated With Complaints of Insomnia in a General Adult Population: Influence of Previous Complaints of Insomnia. Arch Intern Med, 152(8):1634-1637.

Stranges, S., Tigbe, W., Gomez-Olive, F., Thoreywood, M., Kandala, N. (2012). Sleep problems: an emerging global epidemic? Findings from the INDEPTH WHO-SAGE. Study among over 40,000 older adults from eight countries across Africa and Asia. Sleep, 35 (8): 1173-1181

^{*}http://www.guardian.co.uk/society/2012/may/11/nhs-spending-sleeping-pills-50m

Cost: £350 (incl V.A.T per 90 hour workshop. Delegates of up to 20 per group.